Welfare is reviewing the situation on continuous basis. All the major hospitals are fully equipped to manage the cases of this illness, having sufficient stock of medicines and laboratory reagents. All the hospitals have been directed to ensure regular and timely reported of cases to Municipal Corporation of Delhi (MCD), which has been identified as the nodal agency to coordinate all the activities.

MCD has undertaken extensive Information, Education and Communication (IEC) measures. Chemoprohhylaxis is being given to high-risk personnel such as health care/ laboratory worker and close contacts of the cases. A central team has investigated and provided technical support for containment of the outbreak of meningococcal disease in Meghalaya state during 4th-11 th April 2008.

Epidemiological analysis of the relevant data is being carried out by N1CD which also provides technical guidelines to States in the neighborhood of Delhi alongwith State of Meghalaya to prevent and control meningococcal diseases, including training and laboratory support to hospitals. NICD has also sent CD Alert on the Meningococcal disease to MCD for circulation to all the reporting units which includes case definition, clinical profile management of cases, prevention and control measures for outbreaks.

Pan-India survey on counterfeit drugs

3477. SHRI AMAR SINGH:
SHRI ABU ASIM AZMI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has launched a Pan-India survey to ascertain the extent of counterfeit drugs produced in our country;

(b) if so, the details thereof;

(c) whether Government has since collected the information in this regard and if so, the details thereof; and

(d) what action Government proposes to take against the producers and suppliers of such drugs which have caused immense harm to the patients?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) It has been decided to carry out a survey to assess the extent of spurious drugs in the country on the basis of statistical principles as suggested by Indian Statistical Institute, Hyderabad.

(d) The Government has taken various measures including steps to further amend the penal provisions already prescribed under Drugs & Cosmetics Act to make the punishment more stringent which will make the law deterrent to the offenders involved in the manufacture or sale of spurious drugs.

National mental health programme

3478. SHRI ABU ASIMAZMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government proposes to review the contents of the National Mental Health Programme;

(b) if so, the details thereof; and

(c) the steps being taken/expected to be taken to post more psychiatrists in **the hospitals** to provide better care and by when?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Yes, Sir. The Government proposes to re-strategise the National Mental Health Programme in Eleventh Five Year Plan to cover the areas of suicide prevention, stress management, school mental health etc. and also to create infrastructure for production of quality manpower/training of personnel etc. for effective deliver of mental health services.

(c) The shortage of psychiatrists and mental health professional is being addressed in the re-strategised National Mental Health Programme for the Eleventh Five Year Plan by having short-term training for general health care personnel. Also more teaching institutes **on** the pattern of NIMHANS are being planned at regional level so that adequate number of psychiatrists are available.

Implementation of NACP-III

3479. SHRI JESUDASU SEELAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the National AIDS Control Programme (NACP)-III being implemented for halting the spread of HIV/AIDS in the country;

(b) the role envisaged for the elected representatives in the NACP-III; and

(c) the role of other local bodies in the NACP-III?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The National AIDS Control Programme (NACP)-III has been formulated to halt the spread of HIV by up-scaling targeted interventions among the high risk groups, behaviour change communication for improved awareness, expanding preventive care, blood safety, support and treatment of HIV infected persons including the treatment of opportunistic infections, provision of anti-retroviral drugs and maintaining of HIV intervention strategies.

(b) and (c) The role of the. elected representatives is to provide leadership in strengthening HIV/AIDS prevention and control programme and create enabling environment free from stigma and discrimination against people living with HIV and AIDS. Like-wise local bodies are also expected to ensure that persons living with HIV/AIDS get access to services, are not stigmatized or discriminated against and help them to cope with their situation by providing a supportive environment.

Complaints against MCI for granting recognition to private medical colleges

3480. SHRI AMIR ALAM KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of complaints received against the decision of the Medical Council of India regarding grant of recognition to private medical colleges, particularly in respect of the grant of recognition on the basis of false representations about the staff strength, building and equipments in these colleges;